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To

Examiner Heather Anne Doty

USPTO

From

Jay Beyer

Pritzkau Patent Group

Number of Pages (including cover) 19

Date Sent

January 27, 2006

Fax #:

571-273-8300

Message

Response to Office Action

Examiner Heather Anne Doty,

Please enter the following documents into the file for application serial number 10/665,267. The following documents include:

Fax cover sheet

1 page

Amendment A Transmittal (in duplicate)

2 pages

Amendment A

16 pages

Total Pages

19 pages

If there are any questions regarding this fax, please call Jay Beyer at 303-499-3859.

Sincerely,

Jay Beyer

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the application of					Examiner: Heather Anne Doty					
Ren	Rene George et al.					Art Unit: 2813				
Serial No: 10/665,267					Attorney Docket: MAT-4					
_	September 17, 2003					Date: January 27, 2006				
For: PHO	TORESIST IM	PLANT (CRUST REM	OVAL)						
CERTIFICATE OF ELECTRONIC TRANSFER I hereby certify that this correspondence is being electronically transmitted to the United States Patent and Trademark Office on January 27, 2006. Signed: Jay R Beyer										
Commissioner of Patents P.O. Box 1450 Alexandria, VA 22313-1450										
SIR: Transmitted herewith is an Amendment for the above application.										
 Small entity status of this application under 37 C.F.R. §§ 1.9 and 1.27 has been established No additional fee is required. Postcard included 										
The fee has been calculated as shown below: (Col. 1) (Col. 2) (Col. 3)						SMALL ENTITY		NON- SMALL ENITTY		
	Claims Remaining		Previously Paid For	Present Extra	֓֟֟֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֡֓֓֓֓֓֓֡֓֓֡֓֡	Rate	Additional Fee	Rate	Additional Fee	
Total Claims		Minus	**80	0	┚╵	x 25		x 50	\$ 0	
Indep. Claim		Minus	***1 4	0]	x 100	\$	x 200		
First Presentation of Multiple Dependent Claim(s)						+180		+360		
* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.						Total		Total	\$ 0	
** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space. *** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest No. Previously Paid For"										

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Applicant(s) hereby Petition(s) for an Extension of Time of _____ month(s) pursuant to 37 C.F.R. § 1.136(a).